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# College Leadership Forum Recommendation Form

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Applicant's Name: \_\_\_\_\_

This student has asked you to provide an assessment of his/her suitability as a participant in the College Leadership Forum for students with disabilities. Please provide information about the applicant's leadership potential and interpersonal and academic skills. Please compare the applicant to the peers on your campus. If additional space is needed for comments, please feel free to attach a separate sheet of paper. Please return the form to the office address provided on the second page, **NOT to the student**. Thank you for taking the time to provide this important evaluation.

| Characteristics   | Outstanding | Very Good | Good | Fair | Poor | Unable to Judge |
|---|-------------|-----------|------|------|------|-----------------|
| <b>MOTIVATION:</b> Genuineness and depth of commitment to professional development                                |             |           |      |      |      |                 |
| <b>MATURITY:</b> Personal development, ability to cope with life situations                                       |             |           |      |      |      |                 |
| <b>RELIABILITY:</b> Dependability, sense of responsibility, promptness, conscientiousness                         |             |           |      |      |      |                 |
| <b>INDEPENDENCE:</b> Ability to complete assigned tasks and to manage time and resources effectively              |             |           |      |      |      |                 |
| <b>INTERPERSONAL RELATIONS:</b> Ability to get along with others, rapport, cooperation, attitude toward authority |             |           |      |      |      |                 |
| <b>PARTICIPATION:</b> Ability to actively participate in class/group discussions, and work with peers             |             |           |      |      |      |                 |
| <b>EMPATHY:</b> Sensitivity to the needs of others  |             |           |      |      |      |                 |
| <b>RESOURCEFULNESS:</b> Ability to discover and use new resources and to manage new and existing resources        |             |           |      |      |      |                 |
| <b>INTEGRITY:</b> Honesty, trustworthiness, decency   |             |           |      |      |      |                 |
| <b>INTELLECTUAL CAPACITY:</b> Ability to integrate learned material and work with a large quantity of information |             |           |      |      |      |                 |
| <b>COMMUNICATION SKILLS:</b> Verbal and non verbal skills, clarity of expression, fluency                         |             |           |      |      |      |                 |

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Applicant's Name

Applicant's strengths as you see them:

Applicant's weaknesses or leadership developmental needs as you see them:

Summary Evaluations:

Overall Recommendation: (circle)      Excellent      Good      Fair      Poor

\_\_\_\_\_  
Evaluator's Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department

\_\_\_\_\_  
Position

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City, State, Zip code

(\_\_\_\_\_)\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Relationship to Applicant

**Deadline** for postmark on Recommendation Form: March 5<sup>th</sup>, 2004

**Please send completed form directly to:**

Iowa Division of Persons with Disabilities  
Attn: CLF Committee  
Lucas State Office Building  
Des Moines, Iowa 50319  
888-219-0471(V/TTY)

